



6-16-05

1652 / \$

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

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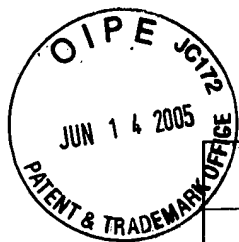
FEE TRANSMITTAL For FY 2005		Complete if Known	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number	10/014,774
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	October 29, 2001
		First Named Inventor	Alessandra D'azzo
		Examiner Name	C. L. Fronda
		Art Unit	1652
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.	02427/100F509-US1

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 04-0100
Deposit Account Name: Darby & Darby P.C.	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
30		- 40 =	x	=	Fee (\$)		Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
9		- 8 =	1	x 100.00 =	100.00		
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
		- 100 =	/50 (round up to a whole number) x				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge):							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	52,392
Name (Print/Type)	Paul M. Zagar	Telephone	(212) 527-7700
		Date	June 14, 2005

Express Mail Label No.	Dated: _____
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**AMENDMENT TRANSMITTAL LETTER**Docket No.
02427/100F509-US1Application No.
10/014,774Filing Date
October 29, 2001Examiner
C. L. FrondaArt Unit
1652

Applicant(s): Alessandra D'azzo et al.

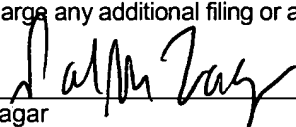
Invention: PROTEIN SPECIFIC FOR CARDIAC AND SKELETAL MUSCLE

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	30	- 40 =		x	
Independent Claims	9	- 8 =	1	x 100.00	100.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					100.00

☐ Large Entity☒ Small Entity☐ No additional fee is required for this amendment.☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 100.00 to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
Paul M. Zagar
Attorney Reg. No.: 52,392

Dated: June 14, 2005

DARBY & DARBY P.C.
P.O. Box 5257
New York, New York 10150-5257
(212) 527-7665

Express Mail Label No.

Dated: _____



Application No. (if known): 10/014,774

Attorney Docket No.: 02427/100F509-US1

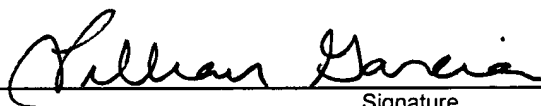
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on June 14, 2005
Date



Signature

Lillian Garcia

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment (10 pages)

Amendment Transmittal (1 page)

Fee Transmittal (1 page)

Transmittal (1 page)

Check in the amount of \$100.00 8896



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Dated: _____

Docket No.: 02427/100F509-US1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Alessandra D'AZZO

Application No.: 10/014,774

Confirmation No.: 9922

Filed: October 29, 2001

Art Unit: 1652

For: PROTEIN SPECIFIC FOR CARDIAC AND
SKELETAL MUSCLE

Examiner: Christian FRONDA

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the final Official Action mailed March 14, 2005, please amend the above-identified application as follows.

Amendments to the claims are reflected in the listing of claims beginning on page 2.

Remarks/Arguments begin on page 6.

06/17/2005 JBALINAN 00000057 10014774

01 FC:2201

100.00 OP